## TELECOPIER COVER SHEET

May 12, 2005

RECEIVED CENTRAL FAX CENTER

		MAY 1.2 soor
То:	Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818/493-2251
Art l	ntion: Examiner M. Bockelman Jnit: 3762 HNOLOGY CENTER 3700	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 703/872-9306		Telecopier: 818/362-4795
RE:	Letter and Supplemental Terminal Disclaimer	Number of pages being sent: 3 (including cover page)
	Applic. No. 10/071,282 Filed: 02/07/2002 Docket No. A02P1013US01	

PLEASE DELIVER TO EXAMINER BOCKELMAN, ART UNIT 3762. THANK YOU.

## RECEIVED **CENTRAL FAX CENTER**

MAY 1 2 2005

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Mark W. Kroll et al.

Serial No.:

10/071,282

**Examiner:** 

M. Bockelman

Filed:

02/07/2002

Art Unit:

3762

Docket No.:

A02P1013US01

For:

SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE TO CONGESTIVE HEART FAILURE USING PHYSIOLOGIC SENSORS

## **LETTER**

hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Ronald S. Tarnura thanks Examiner Bockelman for the courtesy extended during the telephone interview on May 12, 2005. The interview was directed to an improper Terminal Disclaimer filed on April 27, 2005. In response thereto, enclosed herewith is a Supplemental Terminal Disclaimer which does not reference claims 1-9 of U.S. Patent No. 6,645,153.

Respectfully submitted.

Ronald S. Tamura, Reg. No. 43,179

Patent Attorney for Applicants

818-493-3157

Enclosure: Supplemental Terminal Disclaimer...

**CUSTOMER NUMBER: 36802** 

Serial No. 10/071,282

Page 1 of 1

Docket No. A02P1013US01

Ø 003

MAY 1 2 2005

PTCVSB/26 (09-04)
Approved for use through 07/31/2006, OMB 0661-0031
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TERMINAL DISCLAIMER TO OBVIATE A DOUBLE PATENTING Docket Number (Optional) REJECTION OVER A "PRIOR" PATENT A02P1013US01 in re Application of: Mark W. Kroll 10/071,282 Application No.: 02/07/2002 Flied: SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE TO For: CONGESTIVE HEART FAILURE USING PHYSIOLOGIC SENSORS The owner', PACESETTER, INC., of 100 percent interest in the instant application hereby disclaims, except as provided below, the terminal part of the statutory term of any patent granted on the instant application which would extend beyond the expiration date of the full statutory term prior patent No. -6,645,153 as the term of said prior patent is defined in 35 U.S.C. 154 and 173, and as the term of said prior patent is presently shortened by any terminal disclaimer. The owner hereby agrees that any patent so grented on the instant application shall be enforceable only for and during such period that it and the prior patent are commonly owned. This agreement runs with any patent granted on the instant application and is binding upon the grantee, its successors or assigns. in making the above discialmer, the owner does not discialm the terminal part of the term of any patent granted on the instant application that would extend to the expiration date of the full statutory term se defined in 35 U.S.C. 154 and 173 of the prior patent, "as the term of said prior patent is presently shortened by any terminal discialmer," in the event that said prior patent later:

sophist researcher. is held unenforceable; is found invalid by a court of competent jurisdiction; is statutority disclaimed in whole or terminally disclaimed under 37 CFR 1.321; has all claims canceled by a reexamination certificate; is in any manner terminated prior to the expiration of its full statutory term as presently shortened by any terminal disclaimer. Check either box 1 or 2 below, if appropriate. 1. For submissions on behalf of a business/organization (e.g., corporation, partnership, university, government agency, etc.), the undersigned is empowered to act on behalf of the business/organization. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Titte 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. XX The understand is an attorney or agent of record. Reg. No. 43,179 Ronald S. Tamura, Attorney for Applicant(s) Typed or printed name 818/493-3157 Telephone Number Terminal disclaimer fee under 37 CFR 1.20(d) included. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. "Statement under 37 CFR 3.73(b) is required if terminal disclatmer is signed by the assignee (owner). Form PTO/SB/96 may be used for making this certification. See MPEP § 324.

This collection of information is required by 37 CFR 1.321. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the emount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-600-PTO-9199 and select option 2.